Investigating post-registration training & progression for UK Biomedical Scientists



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Introduction

The aim of this study was to investigate approaches to post-registration training, and specifically the use of the Institute of Biomedical Science (IBMS) Specialist Diploma, for the professional development and career progression of Biomedical Scientists in the UK.

The IBMS Registration Portfolio for the Certificate of Competence is the main route to registration with the Health & Care Professions Council (HCPC) for Biomedical Scientists (BMS) in the UK. This is a means of evidence-based assessment to demonstrate a candidate has met the Standards of Proficiency at a threshold level for safe, effective practise.

The critical change between this and the previous requirements for registration is that in the old 'logbook' format, elements of generic and some discipline-specific laboratory training must have been completed before a candidate could be registered. In the Registration Portfolio, only the generic elements are covered and discipline-specific training is now demonstrated via the Specialist Portfolio, undertaken after HCPC registration. The aim of the Specialist Portfolio is to support a BMS's immediate post-registration training; it is "a specialised professional qualification for early career Biomedical Scientists"^[1] to demonstrate training, practical skills, specialist knowledge and competency against a benchmark standard.

The IBMS qualification structure is designed to align with Agenda for Change (AFC), a framework for pay in the NHS, which is intended to support career progression. However, person specifications for BMS roles are still set locally and the Specialist Portfolio is not tied to any universal mandatory requirement. Additionally, a growing number of NHS pathology services are now run by private pathology providers who employ HCPC registered BMS, but are not bound by AFC.

A small number of studies have looked laboratory training with respect to the Registration Portfolio rather than the specialist, but identified key factors and issues in the delivery of laboratory-based training that may also be pertinent specialist level training [2][3][4]. There is very little research on this topic and so this study sought to explore the subject and identify variation and factors that shape practise in this area, identify inconsistency and perhaps provide areas for future study.

Research Aim & Objectives

Research Question – What approaches do clinical laboratories take to post-registration training and progression for Biomedical Scientists?

Research Objectives

- To find out whether laboratories use the Specialist Portfolio as a means of career progression, in line with IBMS recommendations, and to estimate how much variation there is regarding this.
- To find out how and why BMSs undertake and complete the Specialist Diploma, or why they have not done this qualification.
- To find out how people feel about their experience of the current system.

Methodology & Recruitment

Qualitative description was chosen to explore the data, due to there being very little background research in this area, and because it can be useful for developing an understanding of potentially complex situations^[5].

Invitations to participate in the study were made via an article published in 'The Biomedical Scientist', and via the IBMS e-newsletter.

A potential limitation of this is that it may have excluded non-IBMS members, who may be an important demographic to include in a full picture. Those who responded may represent a certain group, or be more actively engaged with the IBMS, which may skew the data.

One-to-one interviews were selected for this study. A semi-structured interview format was used, and interviews were carried out using Microsoft Teams video calls.

Twelve Biomedical Scientists were recruited and interviewed. Participant demographics are shown in Table 1. All participants worked in IBMS approved training laboratories, which offered the Specialist Portfolio in one or more disciplines. No two participants were from the same laboratory.

Table 1. Participant Demographics				
UK Region	London	2		
	South of England (excluding London)	2		
	Midlands	2		
	North of England	4		
	Wales	1		
	Scotland	0		
	N. Ireland	1		
Current Lab Discipline	Pan-pathology role	1		
	Histopathology	3		
	Infection & Immunity	1		
	Immunology	1		
	Haematology & BT	2		
	Biochemistry	3		
	Specialist or multidiscipline service	1		

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Findings

Use of the Specialist Portfolio in post-registration training and progression.

There were differences in whether or not a Specialist Diploma is required to progress to the next grade (band six or equivalent), and whether progression is automatic upon completion. This is summarised in Table 2.

Table 2. Summary of how the Specialist Diploma is used in training and progression				
Is the specialist portfolio a requirement to progress from band 5 to band 6 (or equivalent)?	Yes	8	2 participants replied 'yes' but also said rules are made flexible for internal applicants who have started or are thinking about doing the Specialist Portfolio.	
	No	4		
Is there automatic progression to band 6 (or equivalent) on completion of the specialist portfolio?	Yes	3	1 participant said a pay uplift is awarded based on completion of laboratory competencies (required to fulfil job role) – specialist portfolio is not required at all. A small additional pay award is made to individuals who complete a specialist portfolio (optional).	
	No	8	Band 5 staff must apply for a band 6 post when available.	
Are registered BMS staff expected to do the Specialist Portfolio, or is it optional?	Not optional	2		
	Optional	10	4 do not require the SP for progression, 6 do require it. 3 participants who said it is optional also commented that there is a waiting list of people wanting to do it in their lab.	

Delivering and supporting the Specialist Portfolio.

Participants expressed a range of views on issues impacting the ability of their laboratory to support Specialist Portfolio training. Some key factors identified were:

- Limited and inconsistent training and support for designated Training Officers.
- Lack of dedicated time for Training Officers and/or for trainees.
- Current portfolio structure and content is inflexible and doesn't reflect the scope of practise in some modern laboratories.
- Difficulties in accessing specialist training for those at the relevant point in their career development, who are then unable to progress without it. Some even felt their lab intentionally delayed or held back specialist training.
- Unable to support the program for all who would need to do it, or cannot provide rotations for BMS who work in satellite laboratories, so some services have removed it as a requirement in their career progression structure.

Overall feelings about the current system.

- Participants felt that the differentiation of registered and specialist BMS (band 5/6) is often arbitrary, and only in place because the AFC bands exist.
- The threshold registration level alone is too low for a practising, autonomous BMS.
- Many band 5s have achieved specialist level via laboratory competencies, but don't have the Specialist Diploma required for promotion. Others feel 'stuck' waiting for training.
- No clear reason why some organisations are able to offer automatic progression on gaining the Specialist Diploma, and some are not.
- The inconsistencies and obstacles discussed impact motivation of both trainers and trainees.
- A preceptorship model for post-registration training could be considered.

Conclusion

This study has shown variation across different laboratories. The sample of participants was not intended to be representative of the population, but has uncovered different requirements for immediate post-registration training and for progression.

Overall, responses were positive that the Specialist Portfolio is considered an important part of development and progression for Biomedical Scientists, but in part because there is no alternative for recognition of practise, and the lack of another mechanism to allow progress through AFC pay bands.

Caution must be employed in extrapolating the findings to the wider population, however issues have been raised around gate-keeping, resources and motivation that are likely to be relevant to post-registration training and the use of portfolios in the wider profession.

A number of themes were identified that may be worthy of further investigation. These include:

- A larger prospective study of the variability across the profession;
- A review of portfolio content with respect to modern laboratory services and Biomedical Scientist scopes of practise, look at more flexible options;
- Quality assurance measures for laboratory training approval;
- Use of centralised online learning or assessment resources;
- Investigating training and support for Training Officers, and the Training Officer experience.

References

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